	Under the Paperwo	Reduction Act of 1995, no pe	teons are required to respo	U.S. Palent and Ind to a collection of I	Approved I Trademark Of Inomation unit	or use through ice; U.S. DEPA	PTO/8B/08 (124) 7/31/2008. OMB 0851-008 ARTMENT OF COMMERCE VAIID ONE:
		Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information units and the persons are required to respond to a collection of information units and the substitute for Form PTO-876.					or Docked Number
	. Al	PLICATION AS FILED	-PARTI	, p		170/2	30343
•		(Column 1) (Column 2)		. SMALL	SMALL ENTITY		OTVINE
	BASIC FEE	NUMBER FILED	, NUMBER EXTRA		CINTLY	OR	OTHER THAN SMALL ENTITY
•	197 OFR 1.16(a) (b) or (a)		, HOMBER EXTRA	RATE (\$)	FEE (\$)		
	8EARCH FEE (27 OFR 1.16K), (1), or (m)					- RA	TE(F) FEE(F)
	GAMINATION CCC						
•	(37 OFR 1.16(0), (P), or (q))	·					
<i>:</i> ·	L. 107, CFR 1.16(1)	mlnus 20 =		<del>  -</del>			
•	INDEPENDENT CLAIMS (37 CFR 1.16(N))			X =	. 7	OR' X	
	APPLICATION	If the specification and dra sheets of paper, the specific	ouds.	X =		UR X	
•	APPLICATION SIZE	15 \$250 (\$405 4 "10 appli	Cauon size fee due			. X	_=
	(37 CFR 1.16(s))	additional so ob and	my) for each	1 1	- 1	-1	
•	MULTINES	35 U.S.C. 41(8)(1)(G) and	37 CFR 1.16(s)	l 1		1	- 1   1.
	MOCTIFICE DEPENDENT O	CAIM PRESENT (37 OFR 1.160)		<del></del>			
	* If the difference in column	I is less than zero, enter or in or					
	APPLICATI	OALAG	otuma 2	TOTAL	7		
	5-11/17	ON AS AMENDED – PAI	RT II			TOTAL	
H	(Colum	mn 1) (Column	12) (Column 3)	••••	•		1
- 1	▼ CUA	MMS HIGHES	T	SMALL ENTIT	Y OR	ОТНЕ	RTHAN
- 1	AFT AMENC	PREVIOUS	LY   EXTRA	RATE (\$) ADD	)( <sub>1</sub>	SMALL	ENTITY
- 1	E bi cut right	2 Minus + O		TION	àL I	RATE (1)	. A001-
- 1	S Independent (17 CFR (.19N))	Minus 30				~~	TIONAL FEE(\$)
1	Application Size Fee (37 C	) 1	x	=	OR	× 20 =	
- 1	FIRST PRESENTATION OF				OR	×200 =	
	THE PROPERTY OF MA	ULTIPLE DEPENDENT CLAIM . (37.	CFR 1.16(I)		-1 1		
, " " " " " " " " " " " " " " " " " " "	,		· TOT	AL .	OR L	360	
·	(Column	1)		L FEE	OR A	OTAL OO'L FEE	
	CLAIMS REMAININ	. 1 H((HF2))	(Column 3)		: "	بالمراجعة	
15	AFTER	HOWBER	PRESENT RAT	E (4) ADDI:	7 _	·	
ENDME	OI OFR LIGHT	Minus +	I	TIONAL FEE (4)	1 1'	RATE (\$)	ADDI.
.   8	Andependent .	Minus +11	- X	= 10	1 -		TIONAL FEE (\$)
· .   📲	Application Size Fee (37 CFR		- x		OR X	=	
	FIRET PRESCRIPTION	1.16(s))			OR: X	=	
-	THE THESENTATION OF MULT	IPLE DEPENDENT CLAIM (37 CFR	1.16(1)				
1 .					OR .	1	
1 :	If the entry in column 1 to less th	lean H	TOTAL ADD'L FE	EE :	OR: 1014	1.	· ·
1	If the 'Highest Number Previous	ian the entry in column 2, write "( sty Paid For IN THIS SPACE is to ty Paid For IN THIS SPACE is te	0° In column 3.	L	ADD'(	. FEE	
TALL T	he Highest Number Previous	Y Paid For IN THIS SPACE IS IN	ess than 3 anter *20.				
USPTO to process) an application confident in the information is marked to the appropriate box in column in							
and the public with a visit of the visit							
ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  If you need as given to have the service of the commission of the com							
	Commission	er for Palonia, P.O. Box 141	Kandra, VA 22313-1450. D	O NOT SEND FEES	OR COMPLET	on Officer, U.S. P	nens alen
	ll you n	eed assisiance in completing the	Com and a series	13-1450.		EU FURMS TO	THIS
		nie	Vall 1-000-PTO-9189	Bud salad police a			